SHREVEPORT POLICE DEPARTMENT
ALCOHOLIC BEVERAGE UNIT
PRIVATE/PROMOTIONAL
PARTY PERMIT
PRICE $ 25.00

PRIVATE PARTY ☐ PROMOTIONAL EVENT ☐

CITY OWNED BUILDING ☐
COMMERCIAL OWNED ☐

LOW CONTENT ☐
HIGH CONTENT ☐

ABO OFFICE USE ONLY

PERMIT NUMBER _____

DATE APPLICATION RECEIVED_____

NAME OF APPLICANT_____

ADDRESS: _____PHONE #_____

SOCAIL SECURTIY #_____DOB:_____MALE:☐ FEMALE:☐ RACE_____

LOCATION OF EVENT/BUSINESS NAME: _____
ADDRESS_____

DATE OF EVENT: _____ TIME OF EVENT: _____

NAME OF HOST OR SPONSORING ORGANIZATION: _____

ADDRESS: _____PHONE #_____

WHAT TYPE OF EVENT? _____ ESTIMATED NUMBER OF PERSON TO ATTEND: _____

Signature of the applicant certifies that all information provided is correct to the best of their knowledge and the following restrictions are understood and will be complied with.

1. Event cannot be open to public.
2. Absolutely no alcohol sales.
3. No cover charge, dues, fees or other emolument is charged or collected.
4. Consumption of alcoholic beverages is not used to attract or induce customers.
5. Guest list must accompany private party application and only guests on the list may attend the party.
6. Party will be limited to the hours the business is zoned to be open but in no case will exceed 12 midnight.
7.

_____
SIGNATURE OF APPLICANT DATE

☐ APPROVED_____ ☐ DISAPPROVED_____
Chief of Police or Designated Representative — Date
Chief of Police or Designated Representative — Date

AUTHORIZATION TO DISCLOSE CRIMINAL HISTORY RECORDS INFORMATION

By signing above, I hereby authorize the Louisiana State Police to release all pertinent criminal record information maintained in their files, other states files, or the FBI files (if applicable) which may confirm or deny my eligibility with the facility or agency named above.

DPSSP6696 Revised 08/2013

FORM APPROVED BY THE CHIEF OF POLICE